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On
Typhus Fever

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Typhus Fever

This disease so formidable in the eyes of the world on account of its supposed highly contagious nature, and which the dread of young practitioners from the intricateness of the course they have to pursue in its treatment has been divided by Nosologists into Typhus Minor and Gravior but this division is rejected by our professor of practice Dr Chapman, as they are the same disease, arising from the same cause, shewing the same symptoms, and requiring the same treatment, with this difference only, that owing to the state of the patient at the time of attack, the one is more mild and slower in its progress than the other.

It is thus defined by Cullen, "a contagious disease, the heat not greatly above

the natural, the pulse small, weak, and for the most part frequent, the urine little changed, the functions of the sensorium very much disturbed, and the strength greatly diminished."

All ancient authors so far as I know believed it to be contagious, and most of the moderns, but more I believe from the high authority of their predecessors than from any real conviction of its truth. That the ancients should have believed it is not to be wondered at, for besides its fatality which was enough to fix its character in their minds, there is one very imposing circumstance attending it; that is, the cause of this disease never affects persons in the open atmosphere, but is confined exclusively to dwellings and sometimes to a single apartment. In this way we see how it might happen that the nurses or attendants might be infected from the

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same cause which produced it in the first instance.

Dr Chapman considers it contagious in a low degree, and I shall not deny that a patient under certain circumstances may so vitiate the atmosphere as to cause it in others, we know that persons in health when crowded together in close and filthy apartments will produce it on themselves, the term contagion would seem to me to be improperly applied to such a disease.

As my ideas of a contagious disease agree with Dr Caldwell's I shall take the liberty of quoting some of his remarks on this point from ~~Cullen's~~ his edition of Cullen's practice.

He says there does not perhaps exist in medical science a point of doctrine that stands on so unstable a foundation, and is at the same time so loosely constructed as that which treats of febrile poison, on other points we require for our satisfaction experimental demonstration, here we rest

contented with the most equivocal appearances, such as scarcely lay a foundation for the feeblest probability.

A disease marked by a few unusual symptoms attacks at once or in succession a family a neighbourhood or an entire community. This is sufficient nothing further respecting it is sought for. No enquiry is instituted as to its real nature, the mere circumstance of numbers suffering from it is deemed sufficient to fix its character.

But what is contagion? he says "it is a secret poison, the result of morbid animal action. It is a positive virus, and poisons certainly from its own qualities, whenever it is applied to a susceptible subject. This it does as well in the rigours of January as in the heats of August, in an open no less than in a confined situation, and in the pure and salubrious air of the country

will suffer a remarkable exacerbation; the patient be attacked with violent head ache, nausea, vomiting of dark bilious matter, sometimes clear bile, to a considerable amount; rigors, succeeded by intense heat over the whole body; great gastric distress; a general uneasiness, pulse very variable, sometimes full and quick, but ~~much~~ compressible; at other times it will be quick, weak, and irregular; often a great degree of debility, at the onset. In other cases the patient is able to stand, or even walk, but still he complains of weariness, and debility; the tongue which before was moist, becomes dry and parched, and if desired to put it out, it becomes tremulous.

As the disease advances, the debility of the muscles of voluntary motion, becomes more considerable, the patient is incapable of getting up, often lies on his back; complains much of his head, confusion of ideas, wandering of the imagination, sometimes delirium, though the patient is more frequently stupid than violent;

gion of small pox, hennepox &c

Cullen speaking of the cause of this fever says "to this purpose it is now well known that the effluvia constantly arising from the living human body if long retained in the same place without being diffused in the atmosphere, acquire a singular virulence, and in that state being applied to the bodies of men, become the cause of a fever which is highly contagious

I agree with Dr. Cullen in believing that the animal effluvia if long retained will produce the disease, but I also believe that it requires this long retention for its propagation, that is, I do not believe that the effluvia passing immediately from the body of a patient will excite the disease but that it acquires that property after having been sometime retained. There seems to be a pe

cular state of the atmosphere also required

This is called the remote cause & Dr
Gullen supposes it acts as a sedative in
producing the proximate, but as all ac-
tive agents must be stimulants. this op-
inion must be erroneous

All debilitating causes which would
render us liable to an attack of any other
fever will have the same effect in this

It is not known with any degree
of certainty the exact length of time between
the application of the cause and the appear-
-ance of the symptoms, but I believe it is sup-
-posed to be never earlier than the tenth, or
later than the seventieth day

In mild cases the first indications
are so slight as scarcely to be noticed, but af-
-ter a few days there comes on a small degree
of chilliness, a lassitude of the body and
diminution to motion, a want of appetite

a dullness and dejection of spirits, the pulse is not quicker than natural. In the evening these symptoms are increased, but in general never rise so high as when the commencing symptoms are more malignant, though it is apt to run a more protracted course

In the commencement of the more malignant cases all the symptoms run much higher, the patient complains of pain in the head, the eyes appear heavy and inflamed there is great loss of strength and soreness of the muscles, pain in the back and loins great dejection of spirits, deep sighings, nausea and sometimes a vomiting of bilious matter

As the disease advances all the symptoms are aggravated, accompanied by coma delirium, muttering of low and inarticulate sounds, tremor of the joints arising to subletus tendendum

The pulse is quick small and hard, but in a more advanced stage, it becomes small and tremulous or intermittent and can scarcely be felt.

The appearance of the urine is subject to great variations, being sometimes of a reddish or flame colour which it preserves for a long time, but it is often pale and changes from time to time in colour as well as consistency.

In the last stages it sometimes deposits a dark and fetid sediment. In a favourable crisis it becomes thick but does not always deposit a sediment.

Most generally the body is prostrated in the first stages, after the disease has run on for sometime it is frequently terminated favourably by a diarrhoea or looaness. In the worst cases a flux appears in the last stage (then the stools are involuntary), they have a dark appearance, a fetid and cadaverous smell.

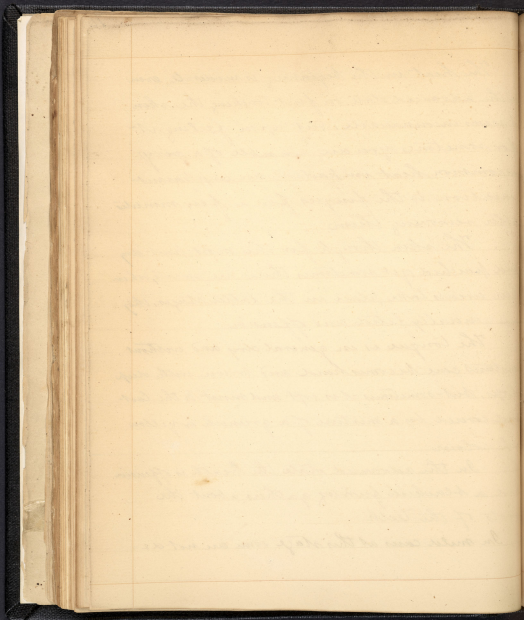
The heat in the beginning is moderate, even in the advanced state on first touching the skin it seems inconceivable, but upon feeling it for sometime you are sensible of a very uncommon heat imparting an unpleasant sensation to the fingers for a few minutes after removing them

The skin though for the most part dry and parched yet sometimes there are sweats, when these sweats take place in the latter stages, they are generally fetid and offensive

The tongue is in general dry and without constant care becomes hard and brown with deep chops, but sometimes it is soft and moist to the last and covered by a mixture of a greenish or yellowish colour

In the advanced state the breath is offensive and a blackish furrow gathers about the roots of the teeth

In milder cases at this stage some are not de-



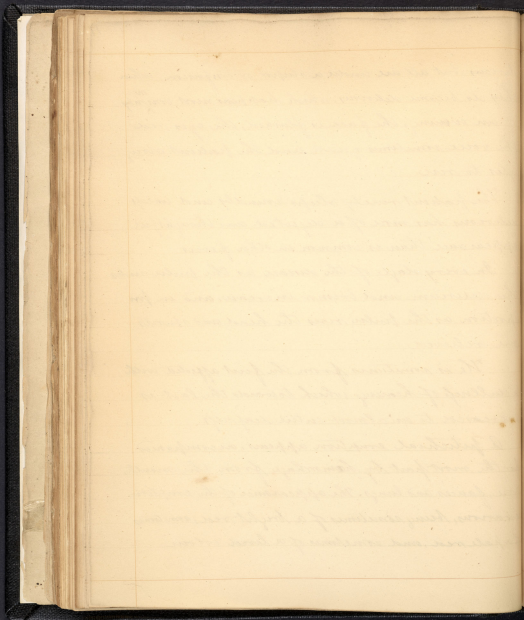
lirious but all are under a stupor or confusion, when they do become delirious, which happens most ⁱⁿ commonly of an evening, the face is flushed, the eyes red the voice sometimes quick and the patient struggles to rise

The patient rarely sleeps soundly and unless delirious has more of a dejected and thoughtful appearance than is common in other fevers

In every stage of the disease as the pulse sinks the delirium and tremor increase, and in proportion as the pulse rises the head and sports are relieved

He is sometimes from the first affected with a dullness of hearing which towards the last is increased to an almost entire deafness

A petechial eruption appears, accompanied for the most part by hemorrhage from the mouth, nose, fauces and lungs. The appearance of the eruption is various, being sometimes of a bright red, sometimes of a pale red, and sometimes of a livid colour



In some it appears as early as the fourth in others not until the fourteenth day

The blood in the last stages appears in a dissolved state from the great loss of vital principle but in some cases where it has been drawn earlier it has shown a buffy appearance

The approaches of death are marked by a cadaverous appearance, the strength of body and mind fails, the brightness of the eyes is lost, the pulse intermits and can scarcely be felt, hiccup comes on the feces are passed involuntarily, the extremities grow cold and by degrees the whole body

This disease does not run its course generally in less than fourteen or twenty days, and sometimes is protracted to a much longer period.

There is so little difference in the first appearance of this and of any other fever, that it would be impossible to distinguish them, nor is it of any importance for if the Physician prescribes for the symptoms he cannot go am

sp. however this state of suspense is not of long continuance

Our prognosis is not to be formed from any one symptom, but from them collectively. When there is great loss of strength, with high degree of delirium, muttering of inarticulate sounds, subultus tendinum, urine foetid, pulse small and tremulous, purging of bloody and fetid stools, sweats offensive, black and offensive furrings about the teeth, petechial eruption of a livid colour, we hardly dare hope for a favourable termination

But when the symptoms mostly abate, with little stupor or delirium, and there comes on a gentle moisture of the skin, when the urine appears thick, the bowels open, the pulse fuller and less frequent, and sometimes a suppuration of the axillary or parotid glands, we may calculate with much certainty on a favourable termination

Before entering on the treatment I shall make

a few remarks on the management of this patient, and first, it is necessary that he should be placed in a well ventilated room, and much noise and company excluded. Secondly, all excrementitious matter should be immediately removed thordly his body linen as well as the bed clothes which are in immediate contact with his body be frequently changed. These precautions I think are particularly necessary in fevers of this type, in which as I believe, from the great loss of the vital principle, the exhalation from the surface of the body acquires a peculiar heaviness which prevents it from passing off into the atmosphere as in health, from which it happens that the patient not only breathes an impure atmosphere, but the ~~perspirable~~^{matter} being confined to the surface of the body, impedes the further progress of itself, or the proper stimulus being prevented from being applied, the exhalants act more feebly.

Therefore by keeping up a free ventilation and

frequently changing the bed clothes and body linen
 will effect in a great measure what I consider the
 chief use of the cold bath - the cleansing the mouths of
 the exhalants and thereby keeping up the insensible perspi-
 ration.

As I consider the cause of this disease to make
 its first impression on the stomach, I should commence
 its treatment with an emetic, ~~this~~ by relieving that
 viscus of the food which remains undigested from the
 torpor occasioned by the overwhelming nature of the
 disease and by producing a relaxation of the surface
 frequently relieves the patient. The late Dr Rush placed
 the greatest reliance on it in this stage. But this does
 not always prove effectual. From the commencement
 there is generally constipation which it is of the greatest
 importance to relieve, we know that in health the body
 as well as mind are depressed by this state of the bowels
 but are both immediately invigorated after the ope-
 ration of a cathartic. For this purpose calomel, or cal-
 omel and jalap combined are thought best. After

frequently changing the old style and very often
 as often as a great measure what I mean the
 of it of the old style the change the number of
 the old style and thus being of the number of

the I consider the cause of the change to make
 a first impression on the student, I think common
 to be content with an answer, then by asking the
 cause of the first which remains suspended from the
 higher occurrence by the increasing nature of the
 cause and by forming a collection of the surface
 frequently asking the student the old style from
 the student's answer in the style. But the new
 style always from effectual, from the common
 style is generally sufficient which is of the first
 question to be asked in the old style the new
 style as much as to be asked in the old style
 but not with necessarily in question after the first
 style of a student. In the higher school a new
 style and style questions are taught that of the

this if the heat of the surface continues, and the pulse is quick and hard, small quantities of blood should be drawn and repeated as circumstances required.

For this practice, which though not of modern date is lately revived we have the high authority of Dr. Chapman, but besides his I also recommend it on the authority of a Physician who has experienced the happiest results from its effects. In the district which I have before mentioned, this fever prevailed with great fatality for two winters under the common mode of treatment, but on its accession in the third bloodletting was adopted and was attended with almost universal success. In conjunction with this diaphoretics were used, and of these the Antimonial and Neutral Mixtures were esteemed most highly.

But this practice though highly useful in many cases would not be found so in all and therefore we should not pursue it to the exclusion of all others, and especially the cold

bath, which under the restrictions of its adopted father Dr Currie I have no doubt is highly useful

Combined with them when there is great affection of the head early in the disease, blisters are of great importance, they should be applied to the back of the neck, between the shoulders, and if the degree of delirium demand it, over the whole scalp. In some cases they are used merely as stimulents, then they are applied to the extremities

But if all these prove of no avail and the patient is sinking, stimulents become necessary and of these the Volatile Alkali, wine camphor and opium are all highly recommended - the Volatile alkali is given in solution combined with Gum Arabic

Opium is given to arrest the discharges which is sometimes an attendant, weakening the patient without any tendency to produce a salutary effect

It is also highly useful in relieving delirium and subsultus tendinum, given in doses of a grain, three or four times a day. But of all these wine is the

The first of these is the question of the
 right of the people to the land. It is
 a question which has been discussed
 in many different ways. Some have
 said that the land is the property
 of the people, and that it should be
 distributed among them. Others have
 said that the land is the property
 of the state, and that it should be
 distributed among the state. Still
 others have said that the land is
 the property of the church, and that
 it should be distributed among the
 church. But all these views are
 based on a false premise. The land
 is not the property of any one
 person or group of persons. It is
 the property of the whole human
 race. It is a common inheritance
 which belongs to all of us. And
 it is our duty to use it in a way
 which will benefit the whole race.
 This is the only just and equitable
 way of dealing with the land.

most useful owing to its greater diffusibility. Its quantity should be regulated according to the urgency of the case.

Brandy in extreme cases, in large quantities is useful. I am told that in a case where the extremities of the patient had become completely cold he was restored by taking as much as a quart of strong brandy in twentyfour hours, at the same time rubbing the surface with it, warmed.

Bark has been used, and when the fever has a tendency to remit or intermit, with advantage but the stomach is frequently so irritable that it will not bear it, and when this is the case the *Serpentaria* is used as a substitute.

Antispasmodics are also used, and not without good effects. Those most highly spoken of are Musk, Castor, and *Apopoetida*, of these the latter is best: it is given to relieve the subsultus tendens, which comes on in the latter stages, but it is much inferior to opium for this purpose.

When Spasmodics appear, the vegetable and Mineral acids are all highly recommended, but the carbonic is most highly esteemed and most commonly used. Dr Thomas speaks in high terms of the muratic acid. his dose for an adult is ten or twelve drops with five or six drops of Laudanum, in about an ounce of an infusion of Cascarella or Columbo, this repeated four times a day, gradually increasing the dose, but Dr Chapman is not inclined to place as much reliance in this as some of the others.

At this time a furring gathers around the teeth and on the tongue, this should be constantly removed.

After all this if the patient still continues sinking, we are not to desert him in despair, but all our former cautions are to be redoubled, and to the other remedies pills of eight or ten grains of Cayenne pepper should be added, the surface should be stimulated by the application of warm

brandy and pepper, and also by Spirits of Turpentine and cantharides, and if he is so far spent that the power of deglutition is lost, the medicines should be administered by injection, increasing the dose threefold. We should never desist from our endeavours, or suffer our hope to expire, for in this fever cases of the most desperate appearance are sometimes recovered from.

It only remains for me to mention the diet and drink, the diet should be light and of easy digestion, as panada, Tapioca, boiled rice &c when the patient requires stimulating wine should be added.

Wine whey though not mentioned among the remedies, is an article of no small importance as it possesses at the same time nutritious and gently stimulating.

The yolks of eggs beat up with wine recommended by Dr Physick in mortification as least apt to nauseate, would seem to be equally

proper here, when the other articles did not agree with the patient

The drink should be acidulated with some of the vegetable acids, the juice of Oranges or Lemons are best, but when they can not be procured any other acid will answer the same purpose

